Hospitalizations for anaphylaxis in Florida: epidemiologic analysis of a population-based dataset.

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BACKGROUND: Previous epidemiologic studies of anaphylaxis have been singleinstitution investigations. The objective of this study was to determine the annual hospital discharge rate and risk factors for anaphylaxis outcomes throughout Florida. METHODS: 464 patients who were hospitalized in Florida for anaphylaxis and discharged in 2001 were identified using a statewide database and ICD-9-CM (International Classification of Diseases, 9th revision, Clinical Modification) codes. Linear regression was used to determine the predictors of length of stay (LOS) and total charges. Relative risks (RR) for ventilator-assisted respiration and anaphylaxis due to food were calculated using binomial regression. RESULTS: Annual hospital discharge rate for anaphylaxis was 2.8/100,000 population. Hospital mortality rate was 0.86%. Median LOS was 1 day. Median total charges was USD 4,982. Asthmatics had increased risk of receiving ventilator-assisted respiration (adjusted RR = 2.72, p = 0.04). Likelihood of hospitalization for anaphylaxis increased with age for both sexes (p < 0.0001). Patients who were <18 years old were three times as likely to be hospitalized for food anaphylaxis (versus other causes) compared to patients who were 71+ years old (adjusted RR = 3.25, p = 0.004). CONCLUSION: Young age was associated with increased risk of hospitalization for anaphylaxis to foods. Asthmatics had increased risk of receiving ventilator-assisted respiration. Likelihood of hospitalization increased with age. 2007 S. Karger AG, Basel

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